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William M. Gardner
Secretary of State

State of New Hampshire

Filing fee:

\$50.00

Fee for Form SRA: \$50.00

Total fees

\$100.00

Use black print or type.

Form must be single-sided on 8½" x 11"paper; double sided copies will not be accepted.

Form 40 RSA 293-A:15.03

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR PROFIT FOREIGN CORPORATION

TO THE SECRETARY OF STATE OF THE STATE OF NEW HAMPSHIRE

PURSUANT TO THE PROVISIONS OF THE NEW HAMPSHIRE BUSINESS CORPORATION ACT, THE UNDERSIGNED CORPORATION HEREBY APPLIES FOR A CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN NEW HAMPSHIRE AND FOR THAT PURPOSE SUBMITS THE FOLLOWING STATEMENT:

FIRST: The name of the corporation is J. N R. Gutters, Inc.
SECOND: The name which it elects to use in New Hampshire is J. N.R. Gutters, Inc.
THIRD: It is incorporated under the laws of Massachusetts
FOURTH: The date of its incorporation is May 14, 1987 and
the period of its duration is Perpetual
FIFTH: The complete address (including zip code and post office box, if any) of its principal office is
SIXTH: The name of its registered agent IN NEW HAMPSHIRE is <u>Tax Services of Londonderry</u> , lnc.
and the complete address (including zip code
and post office box, if any) of its registered office IN NEW HAMPSHIRE is (agent's business address)
1A Commons Drive Suite One Londonderry New Hampshire 03053
SEVENTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).
EIGHTH: The principal purpose or purposes which it proposes to pursue in the transaction of business in New Hampshire are residential and commercial construction and site services and all other lawful activities
in the State of New Hampshire
Chata of New Hampshire

State of New Hampshire
Form 40 - Application for Certificate of Authority 4 Page(s)



NINTH: The names and usual business addresses of its current officers and directors are: (If there are additional officers or directors, attach additional sheet OR if the laws of the state of incorporation do not require directors, indicate below.)

<u>Name</u>	<u>Title</u>	Address
<u>OFFICERS</u>	•	
Jonathan P. Raymond	President	147 Corliss Hill Road
		Haverhill MA 01830
Jonathan P. Raymond	Treasurer	147 Corliss Hill Road
		Haverhill MA 01830
Jonathan P. Raymond	Secretary	147 Corliss Hill Road
		Haverhill MA 01830
<u>DIRECTORS</u>		
Jonathan P. Raymond	Director	147 Corliss Hill Road
	•	Haverhill MA 01830
	By Signature of its President Jonathan P. Raymond Print or type name	aymond
	Date signed: September 24, 2009	

DISCLAIMER: All documents filed with the Corporate Division become public records and will be available for public inspection in either tangible or electronic form.

Mail fees, <u>DATED & SIGNED ORIGINAL</u>, <u>ORIGINAL CERTIFICATE OF LEGAL EXISTENCE OR GOOD STANDING ISSUED BY THE STATE OR COUNTRY OF INCORPORATION AND FORM SRA to: Corporate Division</u>, Department of State, 107 North Main Street, Concord, NH 03301-4989.



William Francis Galvin Secretary of the Commonwealth

The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

September 22, 2009

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

J. N R. GUTTERS, INC.

is a domestic corporation organized on May 14, 1987, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Processed By: nim

Form SRA – Addendum to Business Organization and Registration Forms Statement of Compliance with New Hampshire Securities Laws

Part I - Business Identification and Contact Information

Business Name: J. N R	t. Gutters, Inc.				
Business Address (include city, state, zip): 38-40 Lancaster Street, Haverhill, MA 01830					
Telephone Number:	(978) 372-4088	_ E-mail:	jnrgutters@aol.com		
Contact Person: Jonathan P. Raymond					
Contact Person Address (if different): 147 Corliss Hill Road, Haverhill, MA 01830					
Part II – Check <u>ONE</u> of [PLEASE NOTE: Most	of the following items in Par t small businesses registering	t II. If more than one in New Hampshire of	e item is checked, the form will be rejected. qualify for the exemption in Part II, Item 1 below. s spelled out in A), B), and C)]:		
because the l A) This b B) Adver	business meets <u>ALL</u> of the for business has 10 or fewer own trising relating to the sale of	llowing three require ers; and ownership interests			
	This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed				
This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation					
This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.					
Part III - Check <u>ONE</u> of the following items in Part III:					
1. This busines	This business is not being formed in New Hampshire.				
sale of owne	This business <i>is</i> being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.				
Part IV – Certification of Accuracy					
executive officer of an expartnership; or 4) one of	existing corporation; or 3) all	of the general partne r managers of a limit	orporators of a corporation to be formed; or 2) an ers or intended general partners of a limited ted liability company; or 5) one or more authorized imited liability partnership.)		
I (We) certify that the information provided in this form is true and complete. (Original signatures only)					
Name (print):	Jonathan P. Raymond	Signatu			
		Date sig			
Name (print):					
Name (mint)			gned:		
Name (print):		Signatu Date signatu	re:		